



Public Educational Tour
July 30-August 2, 2012

Agenda

- Welcome and Introductions
- KanCare Overview
- How KanCare Will Affect You
- Break
- Questions

KanCare Overview

Governor Brownback came into office facing:

- **\$200 million over budget for Kansas Medicaid**
- **More people are enrolling in Medicaid. The cost to serve each person is also increasing**
- **The program focus has been on paying for your immediate medical needs, not your overall health issues.**
- **KanCare companies will be held accountable for health outcomes.**

Medicaid Populations and Key Concerns

MEDICAID POPULATION FOCUS	KEY CONCERNS
Children, Families, and Pregnant Women Enrolled: 210,000 (SFY 2010)	Family situations change. Members lose coverage and then are approved again.
Aged Enrolled: 36,000 (SFY 2010)	Higher-than-average number of Kansas seniors in nursing homes
Disabled Enrolled: 57,000 (SFY 2010)	Services provided through too many places

Stakeholder Outreach & Involvement

- Gov. Brownback announced in January 2011 that he would reform Medicaid.
- The state asked Kansans for ideas on how to improve the program.
- The goals were to:
 - Reduce cost growth
 - Create a plan that would be long-term
 - Improve the quality of Medicaid services

People Like You Submitted Feedback:

- 60+ submissions with more than 100 ideas submitted in February 2011
- 200 additional responses received online
- 1,450 participants and more than 1,600 individual ideas generated from four public forums last summer

Stakeholder Themes

Integrated, whole-person care

Create Ways for you to become more Independent

New ways to receive care

Enhance community-based services

State of Kansas Goals

Improve health outcomes

Lower cost over time

No eligibility cuts or provider cuts

Address stakeholder key themes

Options

☒ ~~CUT PROVIDER PAYMENTS~~

☒ ~~REDUCE MEMBERS~~

☒ ~~REDUCE SERVICES~~



The Solution:



Major changes to Kansas Medicaid



**Person-Centered
Care Coordination**



**Clearer
Responsibility**



Improved Outcomes



**Less Complex
Funding**



Person-Centered Care Coordination

- You won't receive any fewer services than what you receive now.
- New services will include:
 - Heart and lung transplants for adults
 - Weight-loss surgery
 - Valued-added services
- Health homes
- You will get help understanding choices about your care
- Safeguards for provider payments and quality



Clearer Responsibility

- Strong protections with a focus on results
- Each KanCare plan must:
 - Maintain a Health Information System
 - Report data to State of Kansas and Centers for Medicare and Medical Services
 - Submit to an External Quality Review
- Performance standards
- KanCare Advisory Groups



Improved Outcomes

Improved outcomes is one of the main focuses of the contracts with KanCare plans.

- Less reliance on nursing homes and other live-in settings
- Fewer hospital visits
- Better care for ongoing illnesses
- Improving access to health services



Less Complex Funding

- **KanCare will move all of Medicaid into a new system of coordinated care**
- **KanCare plans will be paid to help you get all of the services you need.**
- **KanCare plans will be rewarded for paying for care that keeps people healthy before they get sick**

How will KanCare Affect Me?

What will Stay the Same

- Your eligibility
- Your current services
- Your Medicaid ID number
- Your review date
- Your right to appeal
- The MediKan program
- The KAN Be Healthy benefits for children

What will Change for Everyone in KanCare

- KanCare will change the way your benefits are provided to you
- Everyone will get a new medical card. This will be from your KanCare health plan.
- The name of your medical program will change

What will Change for Everyone in KanCare

Division of Health Care Finance



will become



What will Change for Everyone in KanCare

- Adults will now get some preventive dental care
- Everyone will get a letter with their new KanCare health plan this fall
- Everyone can choose to change to a different KanCare health plan

Example: Sandra (pregnant mom)

How will KanCare affect Sandra?

- The benefits Sandra is currently getting in Medicaid or HealthWave will not change.
- She may get more services in January.
- When Sandra's baby is born, it will be in the same plan as Sandra
- She can still get transportation to her medical appointments.
- After January, transportation and all other services will be provided by her new KanCare health plan

Example:

Rosa (children in HealthWave)

How will KanCare affect Rosa?

- The benefits that Rosa's children are getting currently in Medicaid or HealthWave will not change.
- She can still get transportation to and from her children's medical appointments.
- After January 2013 the new plan will provide transportation and all other services to Rosa and her children.
- Rosa will still need to have her case reviewed once a year.

**Example:
Susan (gets mental health
services)**

How will KanCare affect Susan?

- The benefits that Susan currently gets in Medicaid will not change.
- She may have more services in January.
- Susan's current providers will be available to her
- Susan will have a care coordinator to help her with her care needs

Example:
**Patty (gets help for substance
use disorder)**

How will KanCare affect Patty?

- The benefits that Patty currently gets in Medicaid will not change.
- She may have more services in January.
- Patty's current providers will be available to her.
- Patty will have a care coordinator to help her and her family with their care needs.

Example:
**Bill (gets home and community
services for his intellectual or
developmental disability)**

How will KanCare affect Bill?

- The benefits that Bill currently gets in Medicaid will not change.
- He may have more services in January.
- The services Bill gets for his developmental disability will not be in KanCare the first year, unless he chooses to take part in a pilot program
- Bill will have a care coordinator from his KanCare plan to help with his medical care needs.

Example:

Fred (gets home and community services and is recovering from a traumatic brain injury)

How will KanCare affect Fred?

- The benefits that Fred currently gets in Medicaid will not change.
- He may have more services in January.
- Fred will have a care coordinator from his KanCare plan to help him with his care needs.

Example:
**Kenneth (gets home and
community services for autism)**

How will KanCare affect Kenneth?

- The benefits that Kenneth currently gets in Medicaid will not change.
- He may have more services in January.
- Kenneth's current provider will be available to him
- Kenneth will have a care coordinator from his KanCare plan to help him and his family with his care needs.

Example:
**Maggie (gets technology
assistance services in her home)**

How will KanCare affect Maggie?

- The benefits that Maggie currently gets in Medicaid will not change.
- She may have more services in January.
- Maggie's current provider will be available to her
- Maggie will have a care coordinator from her KanCare plan to help her and her family with her care needs.

Example:
**Joan (is elderly and gets home
and community services)**

How will KanCare affect Joan?

- The benefits that Joan currently gets in Medicaid will not change.
- She may have more services in January.
- Joan's current provider will be available to her.
- Joan will have a care coordinator from her KanCare plan to help her with her care needs.

Example:
Alice (lives in a nursing facility)

How will KanCare affect Alice?

- The benefits that Alice currently gets in Medicaid will not change.
- She may have more services in January.
- Alice's current provider will be available to her.
- Alice will have a care coordinator from her KanCare plan to help her with her care needs.
- If Alice chooses to move back home, her care coordinator will help her get services at home.